



Doc Code:

PTO/SB/02 (01-06)

Approved for use through 12/31/2008. OMB 0651-0035

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/725,677
Filing Date	12/02/2003
First Named Inventor	Sharon L. Apichella
Art Unit	3711
Examiner Name	Dolores R. Collins
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application:

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☐ The address associated with  
Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Harding, Earley, Follmer & Frailey				
Address	86 The Commons at Valley Forge East 1288 Valley Forge Road P.O. Box 750				
City	Valley Forge	State	PA	ZIP	19482-0750
Country	United States				
Telephone	610-935-2300	Email			

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71  
Statement under 37CFR 3.73(b) is enclosed. (Form PTO/SB/06)

## SIGNATURE of Applicant or Assignee of Record

Signature	<i>Sharon L. Apichella</i>		
Name	Sharon L. Apichella		
Date	4/17/06	Telephone	610-269-7164

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

☒ Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending on the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	10/725,677
Filing Date	12/02/2003
First Named Inventor	Sharon L. Apichella
Title	Methods and apparatuses for teaching...
Art Unit	3711
Examiner Name	Dolores R. Collins
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
John F. A. Earley	17,952
John F. A. Earley III	31,350
Frank J. Bonini, Jr.	35,452
Charles L. Riddle	54,779

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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☐ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Harding, Earley, Follmer & Fralley				
Address	86 The Commons at Valley Forge East 1288 Valley Forge Road, P.O. Box 750				
City	Valley Forge	State	PA	Zip	19482-0750
Country	United States				
Telephone	610-935-2300	Email			

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98).

## SIGNATURE of Applicant or Assignee of Record

Signature	<i>Sharon L. Apichella</i>	Date	4/17/06
Name	Sharon L. Apichella	Telephone	610-269-7164
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple.

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This collection of information is required by 37 CFR 1.31, 1.32 and 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending on the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



Doc Code:

PTO/SB/82 (01-06)

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**REVOCATION OF POWER OF  
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Application Number	10/725,677
Filing Date	12/02/2003
First Named Inventor	Sharon L. Apichella
Art Unit	3711
Examiner Name	Dolores R. Collins
Attorney Docket Number	

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☐ Assignee of record of the entire interest. See 37 CFR 3.71  
Statement under 37CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Mary D. Sutton		
Date	4/17/06	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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First Named Inventor	Sharon L. Apichella
Title	Methods and apparatuses for teaching...
Art Unit	3711
Examiner Name	Dolores R. Collins
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John F. A. Earley III	31,350
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<input checked="" type="checkbox"/> Firm or Individual Name	Harding, Earley, Follmer & Fralley				
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## **SIGNATURE of Applicant or Assignee of Record**

Signature	<i>Mary D. Sutton</i>	Date	4-17-06
Name	Mary D. Sutton	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

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